Rev **(1949) Department.**

M, **SERIES.**

G.O. NO. 983

Dated 4.4.49

[Despatch Abstract.]

A38

Board of Revenue, Madras.

Subject.

Land - (S.Kanara) - Mangalore Tk. - Mudushedde village - S.Nos. 35/3, etc. ~~xxxxxxxx~~ - Reservation to the Medical Dept. for a T.B.Sanatorium - Proposals.

Ref.B4-1814/49-1 dated 5-3-49.

From

K.N.Anantaraman Esq., ICS.,
Secretary, Board of Revenue.

W.R.S.Sattianathan Esq., ICS., Commr. of Land Rev., & C.Taxes.

Read:- S. Kanara Collector's Ref.C.4235/B3-49 d/16-2-49.

The President of the South Kanara Branch of the Madras Provincial Welfare Fund has taken up a Scheme to establish a T.B.Sanatorium in South Kanara District and has applied to the Government for a half-grant-in-aid towards that Scheme. In pursuance of a D.O.letter dated 26-7-1948 (copy enclosed) from Mr. Kaiwar, the then Collector of South Kanara to the Private Secretary to His Excellency the Governor of Madras, the Surgeon General with the Government of Madras, desired the Superintendent of the T.B.Hospital, Madras, to inspect the various sites proposed for the purpose in South Kanara district After inspecting all the sites proposed, the Superintendent of the T.B.Hospital has selected a block of about 263-57 acres of lands in Mudushedde village of Mangalore taluk situated about 6 miles from Mangalore town. His report is enclosed. The site selected by him has been peg-marked. Subsequently in his ~~xxxxxxxxxxxx~~ Ref.No.392996, P.W., d/13-10-1948, the Surgeon General has recommended to the Government the establishment of a Tuberculosis Sanatorium in South Kanara Dt. on condition that half the estimated capital cost is met by the District Committee of the Provincial Welfare Fund, the other half of the non-recurring expenditure being met from Government Funds. The Sanatorium when completed is to be taken over by Government and run as a Government institution. A copy of the Surgeon General's letter to the Joint Secretary to Government, Edn. and Pub. Health Dept., Madras is enclosed for ready reference.

2. A combined sketch of the site selected by the Superintendent of the T.B.Hospital, Madras, is enclosed. The site selected consists of S.Nos.35-3, 75-2 and 77-1 of Mudushedde village of Mangalore taluk, standing registered as Government assessed waste dry lands and containing no tree-growth or other improvements of any kind whatever. These lands were reserved in 1917 for purposes of Mangalore Town water supply Scheme and they continue to be so exhibited in the Village records. Though these lands were reserved more than 30 years ago for the Water supply scheme, they have not been so far utilised for the purpose perhaps as the Water Supply Scheme has not so far been proposed or sanctioned by the Government. There was also an objection from the villagers of Mudushedde Village against utilising this site for a Sanatorium, but enquiry has shown that as the Medical Department wants only about 263-57 out of a block of 600 acres the villagers are not likely to press their objections. However I have not received a formal requisition from the medical authorities for the transfer of these lands to the Medical Department, and there is also no information whether the Government ~~xxx~~ have sanctioned the scheme. What the Secretary of the Provincial Welfare Fund wants is only to have these lands reserved for a period of ten years for the purposes of the proposed T.B.Hospital, and I accordingly recommend that the Board may be pleased to order the reservation of an extent about 263-57 acres of lands in S.Nos.35-3, 75-2 and 77-1 of

Mudushedde village of Mangalore taluk for a period of ten years for the said purpose. As the lands are barren dry lands, I propose an average market value of Rs.150/- per acre in respect of them. Proposals for the actual transfer of the lands to the Medical Department will be submitted to the Board after the receipt of a requisition from the Medical Authorities, and after the sanction of the scheme by Government.

Copy to the Secretary, The Madras Provincial Welfare Fund, South Kanara Branch, Mangalore.

(True copy)

REFERENCE.

Submitted to the Government.

2/ The Board recommends that the Collector's proposal to reserve an extent of Acs.263-57 of land in S.Nos.35/3, 75/2 and 77/1 of Mudushedde village for the Medical Department for the construction of a T.B. Sanatorium may be approved.

For Secretary.

To the Secretary to the Government, Revenue Dept., Madras, with a sketch and encls. (will follow)

k.t.a.5/3.

Encs to Bds. Ref. B. 4. 1814-49-1d. 5/3/49.

To

The Secretary to Government.

Revenue Department

Madras

A 3

5/3/49

7/3/49

Copy of letter dated-26-7-1948, from the Collector of South Kanara, Mangalore.

Sub:- Provincial Welfare Fund - Proposals to open a Tuberculosis Hospital in the South Kanara District at Moodushedde -

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For some years past both the local Medical Practitioners and the Medical Officers of Government have been observing an increasingly large number of persons suffering from Tuberculosis seeking treatment or relief. The opinion seems to be held that there has been a progressively increasing incidence of the diseas possibly due to the lowering of the standards of living and the greater prevalance of malnutrition or undernourishment over the past four or five decades apart from the increasing dust nuisance in all urban areas through which the major roads pass. There is considerable local enthusiasm for opening a First Class Tuberculo -is Hospital and Sanatorium in this District. A site has been tentatively selected at Moodushedde on the outskirts of Mangalore Town proper. It is within easy reach of Mangalore Town and Mangalore itself is as well served with communication as is possible under present conditions. I understand that this site is suitable for a Tuberculosis Hospital and Sanatorium; but exper opinion has not yet been obtained.

2. The cost estimated by the Surgeon-General amounts to Rs.6,85,000/- for a 100 bed-hospital with attached single cottage and semi-detached cottages. The Surgeon-General has asked the Provincial Welfare Fund to raise the entire amount of Rs.6,85,000 locally and has said that if that amount is raised and the Hospital built, the Government would undertake to run the institution.

3. It rather strikes me that it is a tall order to ask the District Committee of the Provincial Welfare Fund to raise such a large amount. If if is intended to discourage the proposal and to let it die of slow attribion, there could be no better line to take than this. Local opinion is rather strong on the issue tha in a venture of this kind it would not be fair to call upon the local population to raise more than half the amount of capital expenditure, particularly when the net running expenditure of the Hospital and Sanitorium may be negligible as the charges collected for the occupation of the single and semi-detached cottages and also charges recovered from paying patients in the General Wards might cover practically the whole of the running expenditure in the Hospital. I believe there is the experience of other Sanitoriums in this Presidency to support this contention about the net running expenditure not being such a heavy burden.

4. In the absence of any assistance from the Central Organisation of the Madras Provincial Welfare Fund, this scheme will not make further headway until we have some encouragement by way of a grant-in-aid from Government. This example of a District producing half the capital expenditure from local contributions, if it catches on, would considerably reduce the capital liabilities of the Province as a whole, as the same rule can be applied to all the other District. I rather feel that there is likely to be a net gain to the Government in accepting this proposal, but I am not sure how the approach should be made. The need for a Hospital and the existence of local enthusiasm and support have to be mobilised in each place. To expect them to produce the entire total capital and hand over the thing to the Government after construction will not appeal to them. Unless the Government themselves have a stake in the institution by having spent some money on it, local opinion will be sceptice about the future of the institution.

5. The problem is one of general interest and perhaps the Provincial Welfare Fund would like to consider the general question and suggest to Government the acceptance of the principle of a grant-in-aid (say half) in cases of this kind. There is one other aspect so far as South Kanara District is concerned. Local opinion firmly believes that more is taken out of the

District than is brought in. I hold firmly that more could and should have been done for this District in the past having due regard to its importance and the contribution it has been making to the Provincial Exchequer. I know it is a dangerous principle to adopt that taxes collected in one place should be spent entirely in or on that place. -But taking the needs of each area into consideration and comparing the state of affairs prevailing in this district to those in some of the other districts, I rather feel that South Kanara deserves a better deal than it has been able to secure for itself in the past. This is only my personal view and let me add I do not belong to this district.

6. Coming back once again to the question of the Tuberculosis Hospital there was a suggestion discussed at the meeting of the District Branch, whether it would not be possible to split up the construction of the Hospital and Sanatorium into say, four phases.

(a) The first phase to consist of the construction of a certain number of single and semi-detached cottages and a few General Wards. In this phase would be included the quarters for the staff ultimately required for running the institution and the full compliment of accommodation required for the administrative offices, out-patients and necessary appurtenances. In this phase will be provided 50 per cent of the cottages, and 25% of the bed strength in the General Wards.

(b) The second phase to provide another 25% of bed strength in the General Wards and another 25% of the single and semi-detached cottages and any additional quarters required.

(c) The third phase to provide the balance of single and semi-detached cottages and another 25% of the general bed strength and

(d) The fourth and the last phase provide sufficient number of General Wards to be constructed to provide treatment for all that may resort to this hesitation.

7. The advantage of splitting the building programme into four phases would be that at the end of the first stage the hospital would start working and people will have something concrete to see before them, appreciate and to contribute if so minded, and as the Hospital Grows, grateful patients who recover and grateful relatives of those patients can be expected to make generous contributions and thus as the years progress, wider and wider circle of the population will start taking interest and contribute until such a stage is reached that the incidence of the disease will be restricted and the hospital bed-strength will reach a stage of equilibrium to treat the cases that arise. The strain on local finances will also be not heavy as the first stage might require 30 or 35% and the ultimate cost; - the 2nd 3rd and 4th stages may require, 20, 20 and 25 per cent of the ultimate capital cost. The idea seems to be a new one and it might require careful planning and drawing up of plans for the ultimate objectives to be achieved and then divide it up into the four phases and undertake construction programme on that basis. If as I expect each Ward contains 20 to 30 beds, the lay out of the Wards and other buildings on the ground can be decided on in the first instance and the wards can be constructed as required at each phase with covered passages giving access to them from the Administrative blocks.

8. I should therefore be grateful if this matter could be considered and the district Branch advised either through me or direct as may be found convenient as to the further stages. What I am anxious is that we should now ride the crest of the wave of local enthusiasm and make the maximum progress possible. If we let this opportunity slip by we may not be able to mobilise the same enthusiasm for this again.

Sd.Ø- S. R. Kaiwar,

Copy of letter No.2154/48, dated 18th September, 1948, from the Superintendent, Government Tuberculosis Hospital, Madras, to The Sugeon-General with the Government of Madras, Madras.

Ref:- Suggeon-General's Ref.No.30299-4-PW, dated 29-7-48.

As desired by the Surgeon-General in his reference quoted above, I visited Mangaloreon 10-9-1948. In the company of the District Collector, Dr. H. V. Adappa, Dr. Kini and Dr. Mallayya, M.L.A., the following sites were inspected by me:

1. Mudishetti
2. Moodbidri
3. Belvai
4. Manipal.

1. Mudishetti: This site is situated about 6 miles from Mangalore Town and it is on the top of a hill covering over an area of 600 acres. The whole of this area belongs to Governmen and it can easily be made available, I am told, for the sanatorium. The place is suitable for a Tuberculosis Sanatorium in all aspects and I am told that though the whole area is barren now, yet trees easily grow provided sufficient care is taken.

2. Moodbidri: The plot is situated in a valley with slopes on either sides but the plain ground available in the valley is too small for a Tuberculosis Sanatorium. In addition to this it has a large amount of small plots of Patta Lands which have t be acquired though most of the lands are uncultivated.

3. Belvai: A large acreage of land is available here but some difficulty may arise as a portion of this plot, nearly 175 acres, has already been given for a proposed Harijan Colony. Int between Udipi and Mangalore Town and during monsoonic months, th access will not be easy.

the place is 20 miles from Mangalore, midway

4. Manipal: This is a suitable site but a Tile Factory, a High School and some industrial concerns have sprung up in this area.

A1

Of all the sites, I am inclined to believe that the site at Mudishetti is the best suited for the proposed sanatorium and when th s sanatorium is developed and the necessity for a second sanatorium for the district is felt, the site at Manipal may be selected.

During my stay at Mangalore I had discussions with variou public men and members of the medical profession in Mangalore Tc and moffassil. I find very great enthusisam for the establishm of a Sanatorium in the district. I also met the members of the District Medical Association, District Branch of the Indian Red Cross Society and Madras Provincial Welfare Fund and had useful discussions with them. The tendency appears to be that if a Sanatorium is started functioning in Mangalore, large amounts as contributions for the sanatorium will be forthcoming for its expansion etc.

Hence I recommend steps may kindly be taken to start a Sanatorium at Mudishetti as early as possible.

Sd./- x x x x x
Superintendent.

Copy of letter Ref.No.39299.6.PW, dated 13-10-1948, from Surgeon-General with the Government of Madras, Madras.

The question of establishing a Tuberculosis Sanatorium in the South Kanara District has been under the consideration of the District Commitee of the Madras Provincial Welfare Fund for some time now and in view of the large number of patients belonging to the district who suffer from this disease and for whom the existing accommodation in the District Headquarters Hospital, Mangalore is very meagre.

2. The site selected for the purpose is situated at Mudishetti about 6 miles from Mangalore Town and it is on top of a Hill covering over an area of 600 acres. The whole of this area belongs to Government and it can therefore be easily made available for the establishment of a Tuberculosis Sanatorium. The Superintendent, Government Tuberculosis Hospital, Madras who inspected this site (among others) has expressed the view that the place is suitable for a Sanatorium in all reppects. It is within easy reach of Mangalore town and the later is well served with such communications as are possible under present conditions. Three other sites in the vicinity of Mangalore town were also inspected, but it is reported that the site at Mudishetti is the best suited for the proposed Sanatorium.

3. A statement showing the recurring and non-recurring expenditure involved in the proposals to establish a Tuberculosis Sanatorium with 50 beds (to start with) is enclosed for the information of the Government. It will be observed from this statement that the capital cost of the scheme is Rs.6,75,200/- while the expenditure on maintenance is Rs.68,800/- per annum. The intention of the District Commitee of the Provincial Welfare Fund is that half the capital cost of the proposed sanatorium as well as the annual recurring expenditure should be met by the Government, the other half of the non-recurring cost alone being met by the District Committee of the Provincial Welfare Fund. The Sanatorium will be constructed by the District Committee and handed-over to Government for being run under their management.

4. There is a sum of Rs.90,000/- available with the District Committee of the Madras Provincial Welfare Fund ear-marked for the purpose and they have written offiers for about Rs.80,000/- The Committee is nopeful of obtaining the balance required to meet its share of half the capital cost of the proposed Sanatorium as there is great enthusiasm in the District to give effect to the proposal at an early date. The District Committee has expressed its inability to meet the entire capital cost of the scheme, as it is not possible to raise such a large amount. Local opinion is rather strong on the issue that in a venture of this kind it would not be fair to call upon the local population to raise more than half the amount of capital expenditure.

5. A copy of letter dated 28-8-1948 received from the Secretary to the Madras Provincial Welfare Fund and a copy of the resolutions passed by the Ad hoc Sub. Committee of the District Branch at its meeting held on the 27th September, 1948 are also enclosed for the information of Government.

6. I would recommend that the scheme may be generally approved by Government on condition that half the estimated capital cost is met by the District Commitee of the Provincial Welfare Fund other half of the non-recurring expenditure being met from Government Funds. The Sanatorium when complete may be taken over by Government and runas a Government institution.

Sd./- x x x x
Surgeon-General with the Government of Madras.

NON RECORRING AND RECURRING EXPENDITURE FOR A TUBERCULOSIS SANATORIUM OF 50 BEDS.

NON-RECURRING.

BUILDING :-

Two General Wards of 18 beds each(C.A.No.506/47) at Rs.31,200 each.	Rs.62400
Four Special Wards of one bed each (C.A.No.507/47) at Rs.5,300/- each.	Rs.21200
Five Special Wards of two beds each (C.A.No.508/47) at Rs.9,000/-.each.	Rs.45000
Administration Block (C.A.No.502/47)	36700
X-Ray Block (C.A.No.503/47)	39500
Operation Theater Block (C.A.No.504/47)	53500
Laboratory block (C.A.No.505/47.	30800
Dispensary	10000
Kitchen Block	21500
Provisions and Medical Stores Room	10000

QUARTERS.

One Assistant Surgeon Class I (C.A.No.513/47).	19700
One Assistant Surgeon Class II (C.A.No.514/47)	11500
Nurses' Quarters (C.A.No.512/47) This may be modified to provide for 6 nurses and one ward sister)	51500
One Senior Clerk (C.A.No.515/47)	10000
One Junior Clerk	9100
One Compounder	4900
One Radiographer I Grade	9100
Other Staff such Nursing Orderlies etc.C.A.No.343/46	46200
Two Dhobies (C.A.343/46) modified	3300

OTHER BUILDINGS:-

Dhoby Khana (C.A.No.17/40)	18000
Mortuary (C.A.No.510/48).	7300
Incinerator (C.A.No.127/1928)	2000
2. Water supply and Drainage and Electrical fittings	75000
3. X-Ray apparatus with screening facilities	30000
4. Operation Theatre Equipment	20000
5. Medical Stores	10000
6. Linen with reserve	4000
7. Laboratory Equipment	3000
8. Ward Equipment such as Cots, Bedside Lockers, Stools, Almirahs, Tepoys, Sputum Mugs etc.	10000

Total Non-Recurring Expenditure Rs. 6,75,200

RECURRING EXPENDITURE PER ANNUM.

a. Maintenance of Buildings		2000
b. Replacing Condemned Linen		1500
c. Maintenance of equipment		1000
d. Medicines and Hospital Necessaries		5000
e. Diet of patients at Re.1-8-0 per patient per diem		27375
f. Other Miscellaneous expences such as Currentwater		2500
G.Staff:		
Civil Assistant Surgeon Class I One at	Rs.250/-	3000
Civil Assistant Surgeon Class II-2 at	Rs.125/-	3000
Ward Sister	1 at Rs.209	2508
Staff Nurses -	6 at Rs.816	4896
Uniform allowance to above		550
Steward	1 at Rs.70/-	840
Store Keeper and Clerk	1 at Rs.70/-	840
Radiographer I Grade	One at Rs.95/-	1140
X.Ray Attendant	One at Rs.45/-	540
Laboratory Attendant	One at Rs.51/-	612
Compounder	One at Rs.56/-	672

Male Nursing Orderlies	4 at Rs.152/-	1,824
Female Nursing Orderlies	Two at Rs.76/-	912
Peon	One at Rs.38/-	456
Electrician	One at Rs.51/-	612
Cooks	Two at Rs.98/-	1,176
Gate Peons	One at Rs.39/-	468
Lascar	One at Rs.39/-	468
Sweeper	One at Rs.35½/-	426
Kitchen Cooly	One at Rs.35½/-	426
Gardner	One at Rs.39/-	468
Dhobies	Two at Rs.86/-	1,032
Toties (Male and Female)	Six at Rs.213/-	2,556
Total Recurring Expenditure for one year.		68,797

Rs.68,797/-

Copy of letter of the Secretary the Madras Provincial Welfare Fund, South Kanara Branch, dated 28-9-1948.

I am in receipt of your letter Roc.No.1588/48 of the 27th instant and, in reply beg to enclose a copy of the resolutions passed at a meeting of the Ad Hoc Sub Committee of the Welfare Fund.

The Committee is of opinion that if the work of constructing the proposed Tuberculosis Hospital is entrusted to the Local Branch of the Madras Provincial Welfare Fund full advantage can be taken of the enthusiasm now prevailing to obtain donations in cash and in kind from all sections the people of the District. Members of the District Committee can also be expected to take a livelier interest in the scheme than if their activities were restricted merely to the collecting of funds.

Proceedings of the meeting of the Ad hoc Sub-Committee held on 27-9-1948 at 5 P.M. at the Collectors Office.

Present:- Dr. U. P Mallaya
Mr. K. R. Karanth
Dr. H. V. Adappa
Mr. D. Mohan Rao.
Mr. C. G. Carlson.
Dr. P. A. Mathew.

Read letter from the Surgeon-General, Madras forwarding Dr. K. Vasudeva Rao's report stating that the site at Moodsheddie is the most suitable one for the Tuberculosis Hospital and estimating the cost of a fifty bed hospital, at Rs.6,75,200/- Resolved that the South Kanara Branch of the Madras Provincial Welfare Fund do agree to meet half the estimated cost of the fifty bed Tuberculosis Hospital to be erected at Moodsheddie, the other half being met by the Provincial Government, as well as the annual recurring expenditure.

Resolved also that in order to draw the maximum benefit from local enthusiasm for the scheme the Committee of the Welfare Fund suggests that it be permitted to undertake the work of constructionsubject to such supervision in regard to designs, plans, estimates, etc., as the Government may consider necessary.

Sd./- x x x x
for Surgeon-General with the Govt. of Madras.

TRUE COPY.

for Secretary

T.M 13720/A 10
15.3.49

From the Asst. Secy to Govt R.D.

To The Asst. Secy. Bd of Rev (L.R.)

Land - (S. Kanara) Mangalore taluk -
Mudushedde Vge - S.Nos 35/3 etc -
Reservation - to the Medical Dept -
for a T.B. Sanatorium - Proposals

From the Bd of Rev Reference Dy - 1814/49-1
dated 5-3-49

The sketch of the area
to have been enclosed with the Bd's

(P.T.O.)

12/

Refee. cited has not been received
Please send it urgently

8/3/49

8/3/49

8/3/49

P.C. to go.

dpd
10/3/49

ASST. SECRETARY TO GOVERNMENT
16671

dated 18-3-49

The sketch called for is submitted herewith.

Yours obedt
18/3/49
Asst Secretary
Board of Revenue
Madras

To
The Secretary to the Govt
R.D. with a sketch

SECY.
11 MAR 1949

GOVERNMENT OF MADRAS
Revenue Department

Past copy of telephonic message, dated the 8th March 1949.

From the Assistant Secretary to Government, Revenue Department.

To the Assistant Secretary, Board of Revenue (Land Revenue).

Land - (South Kanara) - Mangalore taluk - Mudushedde village - S.Nos. 35/3 etc. - Reservation to the Medical Department - for T.B. Sanatorium - Proposals.

From the Board of Revenue, reference B.4:1814/49-1, d/5-3-49.

The sketch of the area said to have been enclosed with the Board's reference cited has not been received. Please send it urgently.

(by order)

Superintendent.

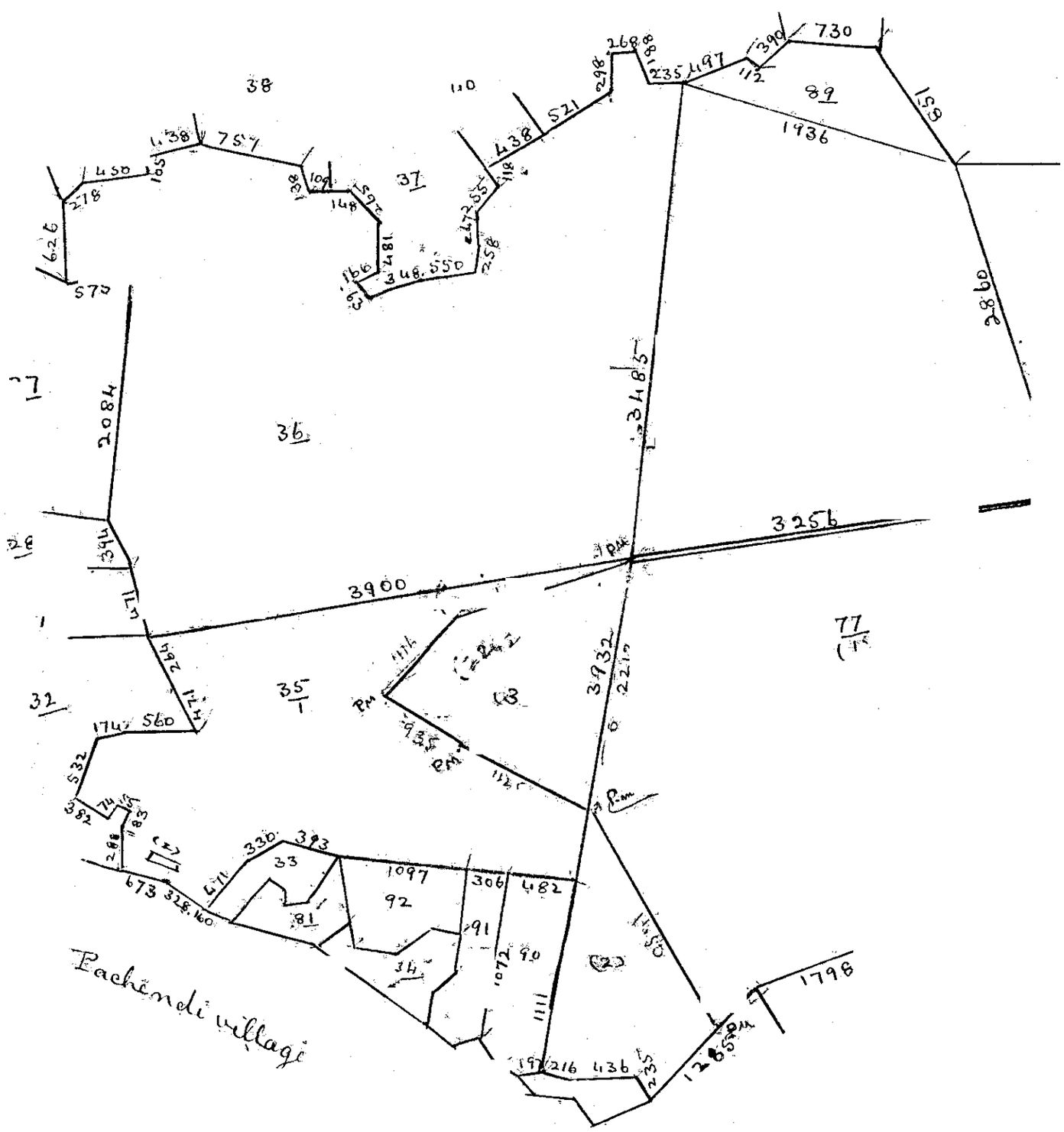
...ch - South Kanara

...k - Mangalore

No. 75

village Name - Mudushe

Scale - 8 inches = 1 ...



3 - 23 -

77 - 1 - 120 - 57

2 - 9 - 70

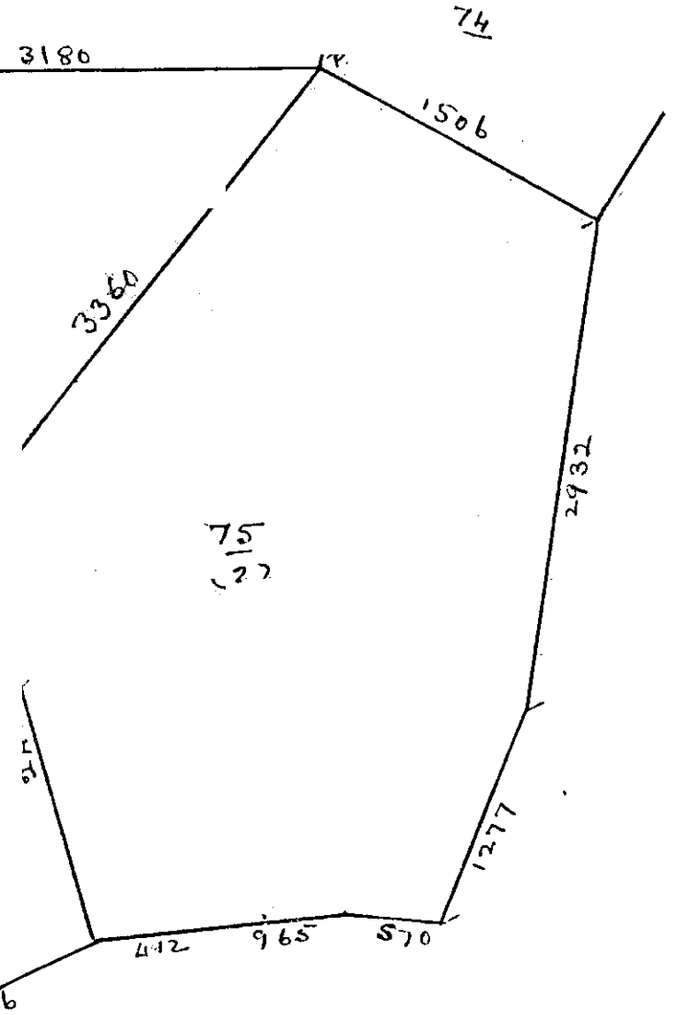
75 - 1 - 42 - 00

2 - 120 - 00

			Area A.	C.
Sno.	35	3	23	-
"	77	1	120	57
"	75	2	120	-
			263	57

65

74



75
(27)

Index

Sno. 35 1 Ab dry (reserved for Water course)
- 2 Proposed Hospital
- 3 Portion proposed to be made over to Medical Deptt

70 . Ab dry (reserved)
71 1 Proposed Hospital
73 1 Ab dry (reserved)
32½ Proposed Hospital
77 1 Ab dry (portion proposed to be made over to the Medical Deptt
77 2 Ab dry (reserved)
76 Proposed Hospital
76 . Ab dry (reserved)
75 1 - . do .
- 2 To be made over to Medical Deptt
6 & 65 Ab dry (reserved)

Ahsan Ali, 9/1/62
Dist. Draftsman

Railvill

A. Rahman
1/2/62
Collector
SK

K. 2 —

28/3/49/4
13720 A/49/
Ft 1-2 Cf

Deeds

Rev Dept

Read:-

From the Bd of Rev Lr No. B4-1874/48 dated 5-3-49.

G.O. Ms No. 983 dated. 9/4/49

A mp 2 Cf

The Govt. accept the recommendation of the Bd of Rev in its letter read above and direct that an extent of Acs. 203-57 cents of land in SNo 35/3, 75/2 and 77/1 of Mudushedde village, Ko Mangalore Taluk, S. Kanara dt. be reserved for the Medical dept for the construction of a T.B. Sanatorium, ~~for the Medical Dept~~.

Bd of Rev Coll of S. Kanara for report to the Secy to the Govt of Madras Rev Dept & to E&P Dept

dspd 11/4/49

2/3/49

26/3/49

Note

Please see the Bd's letter and its enclosures on Ft 1-9 Cf. The Bd's proposal at A mp 2 Cf may be accepted.

E&P Dept may see before ~~issue~~ Finance

26/3/49

26/30347

E&P

E.P.H(91) Fin may be pensed and passed Finance.

4.4.49

Finance Accts

Seen

Comptroller Rev

ADDITIONAL DEPUTY SECRETARY 23015 5-APR 1949 FINANCE DEPARTMENT

Revno 13720 A/49-1

31.3.49

ADDITIONAL ASST. SECRETARY TO GOVERNMENT 21065 7-APR 1949 REVENUE DEPARTMENT

ADDITIONAL ASST. SECRETARY TO GOVERNMENT 1-APR 1949 HEALTH DEPT

TTB 2/4/49

E&P Revno 25635 91/49-1

Finno 23015/Accts -49-1 5-4-49. 4.4.49

21/4/49